

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4404 OF 6725

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**DNC Services Corp./Dem. Nat'l Committee**

Full Name (Last, First, Middle Initial)

**A. Patricia Pirch**Mailing Address 1650 Fillmore St  
#904 Apt 904

City	State	Zip Code
Denver	CO	80206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2015

**Transaction ID : C32137779**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Robert Pirkle**

Mailing Address 3906 Laurel Oak Cir

City	State	Zip Code
Murrysville	PA	15668-8500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Microseeps, Inc.

President

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2015

**Transaction ID : C32169821**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Arlene W Pirollo**

Mailing Address 252 E Radcliffe Dr

City	State	Zip Code
Claremont	CA	91711-2833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Boling Clinical Trials

Registered Nurse/Pharmacist

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2015

**Transaction ID : C32116408**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

400.00